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Fill in this information to identify your c		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your **Bryant** government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). Crawl Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name Only the last 4 digits of $xxx - xx - \underline{6} \underline{2} \underline{6} \underline{0}$ xxx - xx - ____ ___ ___ your Social Security number or federal OR OR **Individual Taxpayer** Identification number

(ITIN)

9xx - xx - ____ ___

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Debtor 1 Bryant First Name			Case number (if known)		
	First Name				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer	✓ I have not used any business names or EIN:	s.		
	Identification Numbers (EIN) you have used in the last 8 years	Business name	Business name		
	Include trade names and doing business as names	Business name	Business name		
	doing business as names	Business name	Business name		
		EIN	EIN		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		8419 S. Paulina			
		Number Street	Number Street		
		Chicago IL 60628			
		City State ZIP Code	City State ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2: Tell the Cour	t About Your Bankruptcy Case			
		. ,			
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see Notice Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box.		
	are choosing to file under	Chapter 7			
		Chapter 11			
		Chapter 12			
		Chapter 13			

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Deb	otor 1 Bryant		Crawl	Case nun	nber (if known)		
	First Name	Middle Name	Last Name		`		
8.	How you will pay the fee	court pay v	pay the entire fee when I file my petition for more details about how you may pay. with cash, cashier's check, or money order lf, your attorney may pay with a credit car	. Typical er. If your	ly, if you are pay attorney is subi	ring the fee your mitting your pay	self, you may
			d to pay the fee in installments. If you iduals to Pay Your Filing Fee in Installme			and attach the A	pplication for
		By la than fee ir	uest that my fee be waived (You may re w, a judge may, but is not required to, wa 150% of the official poverty line that apple installments). If you choose this option, g Fee Waived (Official Form 103B) and file	ive your ties to you you mus	fee, and may do ur family size an st fill out the App	so only if your i d you are unabl	ncome is less e to pay the
9.	Have you filed for bankruptcy within the	□ No					
	last 8 years?	✓ Yes.					
		District N	I.D. III.; Ch. 13; Case Dismissed	_ When	05/15/2014 MM / DD / YYYY	Case number	14-18325
		District _		_ When	MM / DD / YYYY	Case number	
		District _		_ When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy cases pending or being	☑ No					
	filed by a spouse who is	Yes.					
	not filing this case with you, or by a business	Debtor _			Relationsh	ip to you	
	partner, or by an affiliate?	District _		_ When	MM / DD / YYYY		
		Debtor _			Relationsh	ip to you	
		District _		_ When	MM / DD / YYYY	Case number, if known	
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord obtained an eviction residence?	judgmen	t against you an	d do you want to	stay in your
			No. Go to line 12. Yes. Fill out Initial Statement Abo		ction Judgment	Against You (Fo	orm 101A)

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Deb	tor 1	Bryant First Name	Middle N	la ma a	Crawl		Case number (if known)	
P	art 3:	•	Middle N nv Bu		Last Name sses You Own as a	a Sole Pro	prietor		
	Are you	u a sole proprietor full- or part-time	<u></u>	No. (Go to Part 4. Name and location of b				
	busines individu separat	oroprietorship is a as you operate as an al, and is not a e legal entity such as ration, partnership, or			Name of business, if any Number Street				
	sole pro	ave more than one oprietorship, use a e sheet and attach it petition.			Single Asset Rea Stockbroker (as of	ness (as defi I Estate (as d defined in 11 er (as defined	ribe your business: ned in 11 U.S.C. § defined in 11 U.S.C U.S.C. § 101(53A) d in 11 U.S.C. § 10	101(27A)) C. § 101(51B))	ZIP Code
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business		can mos	set ap	ppropriate deadlines. If	you indicate nent of opera	that you are a sma tions, cash-flow sta	II business deb atement, and fe	business debtor so that it otor, you must attach your ederal income tax return 116(1)(B).
	debtor	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under C	hapter 11.			
		For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I a	ım NOT a small bu	siness debtor	according to the definition in
		C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I a	am a small busines	s debtor accor	ding to the definition in the
Pa	art 4:	Report If You O	wn oi	r Hav	e Any Hazardous F	Property o	r Any Property	y That Need	ls Immediate Attention
	propert alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable to public health or		No Yes.	What is the hazard?				
	safety? any pro	or do you own operty that needs attention?			If immediate attention	is needed, w	hy is it needed?		
	For exa perisha livestoc a buildi repairs?			Where is the property?		Street			
						City			State 7IP Code

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Debtor 1 Bryant Crawl Case number (if known) Last Name

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

About Debtor 1:

certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

	I am not required	to receive	a briefing	about
_	credit counseling	because o	of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

reasonably tried to do so.

through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Bry	ant Name	Middle N	ame	Crawl Last Name		Case number (i	f know	n)
Р					for Reporting		ses		
16.	What kind o have?	f debts do you	16a.		-	dividual pr 6b.	sumer debts? Consumer dimarily for a personal, family		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.		•	s or invest 6c.	iness debts? Business det ment or through the operatio		debts that you incurred to obtain e business or investment.
			16c.	Sta	te the type of deb	ts you owe	e that are not consumer or bu	usines	s debts.
17.	Are you filin Chapter 7?	re you filing under hapter 7?		No.	I am not filing ur	nder Chap	ter 7. Go to line 18.		
	Do you esting any exempt excluded and			Yes.	•		•	-	xempt property is excluded and to distribute to unsecured creditors?
	administrati are paid tha available for	ve expenses t funds will be distribution d creditors?			□ No □ Yes				
18.	How many of you estimate owe?			1-49 50-99 100-1	199		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.	How much of estimate you be worth?	-		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much of estimate you be?	do you ur liabilities to		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Bryant		Crawl	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
Part 7:	Sign Below				
For you		I have exami and correct.	ned this petition, and I dec	lare under penalty of perjury that the information provided is true	
			11, United States Code. I	, I am aware that I may proceed, if eligible, under Chapter 7, 11, 1 understand the relief available under each chapter, and I choose	
		•	· ·	not pay or agree to pay someone who is not an attorney to help maind read the notice required by 11 U.S.C. § 342(b).	Э
		I request relie	ef in accordance with the c	hapter of title 11, United States Code, specified in this petition.	
		connection w	•	concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years and 3571.	ί,
		X /s/ Bryat	nt Crawl awl, Debtor 1	X Signature of Debtor 2	
		,	on 07/21/2016 MM / DD / YYYY	Executed on	

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Debtor 1	Bryant	Crawl	Case number (if know	n)
	First Name	Middle Name Last Name		,
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		eligibility to proceed under Chapter relief available under each chapter the debtor(s) the notice required by	ed in this petition, declare that I have 7, 11, 12, or 13 of title 11, United Stafor which the person is eligible. I als 11 U.S.C. § 342(b) and, in a case in er an inquiry that the information in the	ates Code, and have explained the o certify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Robert J. Adams & Asso Signature of Attorney for Debtor		07/21/2016 MM / DD / YYYY
		Robert J. Adams & Associa	ates	
		Printed name Robert J Adams & Associa	tes	
		Firm Name		
		901 W Jackson Suite 202 Number Street		
		Chicago	IL	60607
		City	State	ZIP Code
		Contact phone (312) 346-010	Email address	
		0013056		_
		Bar number	State	

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Fill in this in	formation to id	entify your case	e and this filing:		
Debtor 1	Bryant		Crawl		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	j) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for	the: NORTHERN	DISTRICT OF ILLINOIS		
Case number				☐ Chack	if this is an
(if known)				_	led filing
Official Forn	n 106A/B				
	VB: Property				12/15
the asset in the c filing together, b sheet to this form	category where you oth are equally res m. On the top of an	uthink it fits best. ponsible for supply y additional pages	List an asset only once. If an asset Be as complete and accurate as ying correct information. If more, write your name and case numing, Land, or Other Real Es	possible. If two married pe space is needed, attach a ber (if known). Answer eve	eople are separate ry question.
✓ No. Go	to Part 2.	•	st in any residence, building, lan	d, or similar property?	
_	here is the property				
	-	•	ll of your entries from Part 1, incl /rite that number here		\$0.00
Part 2: De	escribe Your Ve	hicles		•	
-		•	in any vehicles, whether they are, also report it on Schedule G: Exe	_	•
3. Cars, vans,	trucks, tractors, sp	ort utility vehicles	, motorcycles		
□ No ☑ Yes					
3.1.	Chayralat	Who has Check or	s an interest in the property?	Do not deduct secured clai amount of any secured clai	
Make: Model:	Chevrolet Cruze		tor 1 only	Creditors Who Have Claim	
Year:	2012		tor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile	age: 70,000		tor 1 and Debtor 2 only ast one of the debtors and another		\$10,700.00
	: t Cruze (approx. 7	· —	ck if this is community property		
miles) 4. Watercraft, a	aircraft, motor hom	•	instructions) r recreational vehicles, other vel	nicles, and accessories	
<i>Examples:</i> E ✓ No	Boats, trailers, motor	s, personal watercra	aft, fishing vessels, snowmobiles, r	notorcycle accessories	
Yes					
	•	-	I of your entries from Part 2, incl	uding any	\$10,700.00

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Deb	otor 1	Bryant First Name	Middle Name	Crawl Last Name	Case number (if known)	
ь	art 3:	•		I Household Items		
				est in any of the following	g items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and f les: Major appliar	urnishings nces, furniture, linens,	china, kitchenware		oranio di oranipuono.
	□ No ✓ Yes	s. Describe C	one room of furnitu	ıre		\$130.00
7.	·	es: Televisions a			pment; computers, printers, scanners; cameras, media players, games	
	☐ No ✓ Yes	s. Describe 2	Tv's, Laptop, Cell	phone and other asso	orted items of electronics	\$300.00
8.		•		orints, or other artwork; bo ctions; other collections, n	oks, pictures, or other art objects; nemorabilia, collectibles	
	✓ No □ Yes	s. Describe				
9.			graphic, exercise, an	d other hobby equipment; s; musical instruments	bicycles, pool tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe				
10.	•		, shotguns, ammunitio	on, and related equipment		
	_	s. Describe				
11.	Example No	-	thes, furs, leather coa	ts, designer wear, shoes,	accessories	
40	Yes	s. Describe C	Clothing			\$150.00
12.	Jewelr y Example		elry, costume jewelry	engagement rings, wedd	ing rings, heirloom jewelry, watches, gems,	
	✓ No ☐ Yes	s. Describe				
13.	Exampl	rm animals les: Dogs, cats, b	irds, horses			
	✓ No ☐ Yes	s. Describe				
14.	did not	•	l household items yo	u did not already list, in	cluding any health aids you	
	_	s. Give specific				
15.			all of your entries fro	om Part 3, including any	entries for pages you have	\$580.00

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Deb	tor 1	Bryant First Name	Middle Name	Crawl Last Name	Case number (if known)	
P	art 4:	Describe You	r Financial Ass	sets		
Do	you owi	n or have any legal o	or equitable intere	st in any of the follo	wing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	les: Money you have petition	e in your wallet, in y	our home, in a safe d	eposit box, and on hand when you file your	
	□ No				Cash:	\$60.00
17.	Depos	its of money les: Checking, savin	gs, or other financi es, and other simila	al accounts; certificat	es of deposit; shares in credit unions, nave multiple accounts with the same	·
	□ No ✓ Ye	s	Institutio	on name:		
	17	7.1. Checking acco	ount: Check	ng Account with 7	7th Depot Federal Credit Union	\$350.00
18.	Examp ✓ No		estment accounts v	vith brokerage firms, ı	money market accounts	
19.	-	-		•	ncorporated businesses, including	
	✓ No	s. Give specific ormation about	Name of entity:	venture	% of ownership:	
20.	Negoti	able instruments inclu	ude personal check	ks, cashiers' checks, p	negotiable instruments oromissory notes, and money orders. ne by signing or delivering them.	
	inf	s. Give specific ormation about	Issuer name:			
21.		nent or pension acc les: Interests in IRA, profit-sharing pla	ERISA, Keogh, 40	11(k), 403(b), thrift sav	rings accounts, or other pension or	
		s. List each	ype of account:	Institution name:		
22.	Your sl Examp		posits you have ma		continue service or use from a company electric, gas, water), telecommunications	
23.	_	s ies (A contract for a	specific periodic p	Institution name or in ayment of money to y	dividual: ou, either for life or for a number of years)	
		S	Issuer name and	description:		
24.		ets in an education I .C. §§ 530(b)(1), 529		-	program, or under a qualified state tuition pr	ogram.
	✓ No		Institution name a	nd description. Sepa	rately file the records of any interests. 11 U.S.C	. § 521(c)

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Deb			Crawl	Case number (if	known)	
	First Name	Middle Name	Last Name			
25.	Trusts, equitable or fu powers exercisable fo		ty (other than anyth	ing listed in line 1), and rights	s or	
	☑ No					
	Yes. Give specific information about the	nem			_	
26.		rademarks, trade secret nain names, websites, pr		tual property; and licensing agreements		
	No No					
	Yes. Give specific information about the	nem			_	
27.		and other general intan mits, exclusive licenses,	-	ion holdings, liquor licenses, p	rofessional licenses	;
	✓ No Yes. Give specific				_	
	information about th					
Mon	ey or property owed to	o you?			po Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
28.	Tax refunds owed to y	ou				
	☑ No					
	Yes. Give specific				Federal:	\$0.00
	about them, including you already filed the	•			State:	\$0.00
	and the tax years				Local:	\$0.00
29.	Family support					
		lump sum alimony, spou	sal support, child sup	port, maintenance, divorce set	tlement, property se	ettlement
	✓ No✓ Yes. Give specific	information		Alir	mony:	\$0.00
		omadon			intenance:	\$0.00
				_	_	\$0.00
					pport:	
					orce settlement:	\$0.00
				Pro	perty settlement:	\$0.00
30.	, ,	•		enefits, sick pay, vacation pay, made to someone else	workers'	
	✓ No✓ Yes. Give specific	information				
31.	Interests in insurance Examples: Health, disa	•	ealth savings accoun	t (HSA); credit, homeowner's, c	or renter's insurance	
	₩ No	•	-			
	Yes. Name the inst					
	company of each po and list its value	•	e:	Beneficiary:	Surre	nder or refund value:
32.		ty that is due you from		•	-	
	If you are the beneficiar	•	proceeds from a life	insurance policy, or are current	tly	
	No No Ves Give specific	information				
	Yes. Give specific	miorinauori			_	

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Deb	_	Bryant First Name	Middle Name	Crawl Last Name	Case number (if known)	
33.	Claims a	gainst third pa	rties, whether or no		uit or made a demand for payment	
	✓ No	Describe each		nourance diame, or ngi		
34.	Other co	ntingent and u		f every nature, includi	ng counterclaims of the debtor and	
	☑ No	set off claims Describe each	claim			
35.	_		ou did not already lis	t		
	✓ No ☐ Yes.	Give specific in	nformation			
36.					ny entries for pages you have	\$410.00
Pa	art 5: D	escribe Any	Business-Relat	ed Property You C	own or Have an Interest In. List any	real estate in Part 1.
37.	Do you o	wn or have an	y legal or equitable i	nterest in any busines	ss-related property?	
		Go to Part 6.				
	Yes.	Go to line 38.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts	s receivable or	commissions you a	Iready earned		ciains of exemptions.
	✓ No ☐ Yes.	Describe				
39.	-	s: Business-rela	shings, and supplies ated computers, software, electronic devices		copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes.	Describe				
40.	Machine	ry, fixtures, eq	uipment, supplies yo	ou use in business, an	d tools of your trade	
	✓ No ☐ Yes.	Describe				
41.	Inventory	/				
	✓ No ☐ Yes.	Describe				
42.	Interests	in partnership	s or joint ventures			
	✓ No ☐ Yes.	Describe N	lame of entity:		% of ownership:	
43.	Custome	r lists, mailing	lists, or other comp	ilations		
	✓ No ☐ Yes.	Do your lists i		dentifiable information	(as defined in 11 U.S.C. § 101(41A))?	

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Deb	tor 1 Bryant First Name	Middle Name	Crawl Last Name	Case number (if known)	
44.	Any business-related pro	operty you did not al	ready list		
	✓ No✓ Yes. Give specific infe	ormation.			
45.				entries for pages you have	\$0.00
Pa			nercial Fishing-Rel armland, list it in Par	ated Property You Own or Have a	n Interest In.
46.	Do you own or have any	legal or equitable in	terest in any farm- or c	commercial fishing-related property?	
	No. Go to Part 7. Yes. Go to line 47.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, pou	ıltry, farm-raised fish			
	✓ No ☐ Yes	,			
48.	Cropseither growing or	harvested			
	✓ No Yes. Give specific information				
49.	Farm and fishing equipm	nent, implements, ma	achinery, fixtures, and	tools of trade	
	✓ No Yes				
50.	Farm and fishing supplie	s, chemicals, and fe	ed		
	✓ No ☐ Yes				
51.	Any farm- and commerci	al fishing-related pr	operty you did not alre	ady list	
	✓ No ☐ Yes. Give specific information				
52.	Add the dollar value of a attached for Part 6. Write			entries for pages you have	\$0.00
Pa	art 7: Describe All P	roperty You Owr	n or Have an Intere	st in That You Did Not List Above	
53.	Do you have other prope Examples: Season tickets		-		
	✓ No✓ Yes. Give specific info	ormation.			
54	Add the dollar value of a	Il of your entries fro	m Part 7 Write that no	mher here	\$0.00

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Debtor 1	Bryant First Name Middle Name	Crawl Last Name	Case nu	mber (if known)		
Part 8:	List the Totals of Each Part of the	nis Form				
55. Part	1: Total real estate, line 2			+		\$0.00
56. Part 2	2: Total vehicles, line 5	_	\$10,700.00			
57. Part :	3: Total personal and household items, li	ne 15	\$580.00			
58. Part	4: Total financial assets, line 36	_	\$410.00			
59. Part	5: Total business-related property, line 45	_	\$0.00			
60. Part (6: Total farm- and fishing-related property	y, line 52	\$0.00			
61. Part	7: Total other property not listed, line 54	+_	\$0.00			
62. Total	personal property. Add lines 56 through	61	\$11,690.00	Copy personal property total	+	\$11,690.00
63. Total	of all property on Schedule A/B. Add l	ine 55 + line 62				\$11,690.00

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F	ill in this info	ormation to id	lentify your	case:					
D	ebtor 1	Bryant		Crawl					
	ebtor 2	First Name	Middle Name	e Last Name					
	Spouse, if filing)	First Name	Middle Name	e Last Name					
U	nited States Bar	kruptcy Court for	the: NORTHE	RN DISTRICT OF I	LLIN	IOIS		☐ Check if this is an	
1 -	ase number known)							amended filing	
Of	ficial Form	106C							
Sc	hedule C:	The Prope	rty You Cl	aim as Exemp	ot				04/16
Usi spa	ng the property to	you listed on Sch	edule A/B: Prop this page as m	erty (Official Form 106	6A/B)	as your sou	rce, list th	esponsible for supplying correct inforn e property that you claim as exempt. essary. On the top of any additional pa	If more
is t exe rec exe pro	o state a specifiempted up to the eive certain beemption of 100% perty is determented.	ic dollar amount e amount of any nefits, and tax-ex 6 of fair market v ined to exceed to	as exempt. Al applicable stat tempt retirement alue under a la hat amount, yo	ternatively, you may utory limit. Some ex nt fundsmay be unl	clair emp imite mpti	n the full fai tionssuch d in dollar a on to a parti	r market as those mount. I cular doll	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an lar amount and the value of the le statutory amount.	
_	art I. Ide	nary the riop	city rou ola	iiii as Excilipt					
1.		exemptions are y	_	Check one only,			Ū	with you.	
	للنا	-		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(t)(3)		
_	_								
2.	For any prope	erty you list on S	<i>chedule A/B</i> th	at you claim as exen	npt, f	ill in the info	ormation	below.	
	-	of the property ar lists this proper		Current value of the portion you own		ount of the mption you	claim	Specific laws that allow exemption	n
				Copy the value from Schedule A/B		eck only one h exemption	box for		
Brie	ef description:			\$10,700.00	$\overline{\mathbf{V}}$	\$1,70	0.00	735 ILCS 5/12-1001(c)	
201	12 Chevrolet (Cruze (approx.	70000	<u> </u>		100% of fai	r market	100 1200 0/12 100 1(0)	
	les) 12 Chavrolet (Cruze (approx.	70 000			value, up to	•		
	les)	oruze (approx.	70,000			limit	statutory		
	e from Schedule	A/B:							
	ef description:			\$130.00	<u> </u>	\$130	.00	735 ILCS 5/12-1001(b)	
On	e room of fur	niture				100% of fai			
Line	e from <i>Schedule</i>	• A/B: 6				value, up to applicable s limit	•		
3.	-	_	-	more than \$160,375?		ed on or afte	er the date	of adjustment.)	
	☑ No								
	Ľ	you acquire the p	roperty covered	l by the exemption with	hin 1	,215 days be	fore you f	iled this case?	

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Crawl Debtor 1 Bryant Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$300.00 \$300.00 735 ILCS 5/12-1001(b) $\overline{\mathbf{Q}}$ 2 Tv's, Laptop, Cell phone and other 100% of fair market assorted items of electronics value, up to any applicable statutory Line from Schedule A/B: 7 limit Brief description: \$150.00 735 ILCS 5/12-1001(a), (e) \$150.00 $\overline{\mathbf{V}}$ Clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$60.00 \$60.00 735 ILCS 5/12-1001(b) ablaCash 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: \$350.00 \$350.00 735 ILCS 5/12-1001(b) $\overline{\mathbf{Q}}$ **Checking Account with 77th Depot Federal** 100% of fair market **Credit Union** value, up to any applicable statutory Line from Schedule A/B: 17.1 limit

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Fill in this info	ormation to ide	entify your case:				
Debtor 1	Bryant		Crawl			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for th	ne: NORTHERN D	ISTRICT OF ILLINO	IS		
Case number					☐ Check if this is	s an
(if known)					amended filing	
Official Form	106D					
Schedule D:	Creditors W	/ho Have Cla	ims Secured b	y Property		12/15
On the top of any 1. Do any credit □ No. Che □ Yes. Fill	additional pages, v	write your name and ecured by your properties this form to the coution below.	d case number (if kno perty?	wn).	es, and attach it to thing	
claim, list the creditor has a	creditor separately f particular claim, list ible, list the claims i	ditor has more than of for each claim. If mo t the other creditors i in alphabetical order	ore than one n Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1			property that	\$9,000.00	\$10,700.00	
Westlake Financ	ial Services	secures the	_	Ψ3,000.00	Ψ10,700.00	
Creditor's name PO Box 54807 Number Street		—— 2012 Chevy ——	Cruze			
Los Angeles City Who owes the det ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and D ☐ At least one of ☐ Check if this c to a communit	Debtor 2 only the debtors and and claim relates ty debt	Continger Unliquida Disputed Nature of lier An agreer Statutory Judgmen Other Other (inc	n. Check all that apply ment you made (such a lien (such as tax lien, r t lien from a lawsuit cluding a right to offset)	Is mortgage or secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$9,000.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$9,000.00

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Fill in this inf	ormation to id	lentify your c	ase:			
Debtor 1	Bryant		Crawl	_		
	First Name	Middle Name	Last Name			
Debtor 2	E: AN	ACT III AT		-		
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for	the: NORTHER	RN DISTRICT OF ILLINOIS	-		
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditors	s Who Hav	e Unsecured Claims			12/15
If more space is not to this page. On the Part 1:	teeded, copy the che top of any add	Part you need, filitional pages, w	I claims that are listed in Schedurill it out, number the entries in the rite your name and case number secured Claims	e boxes on the left. A		
1. Do any credi	tors have priority	unsecured clair	ms against you?			
☐ No. Go t ✓ Yes.	to Part 2.					
claim. For ea show both pric more space is	ch claim listed, ide ority and nonpriorit	entify what type o ry amounts. As n y unsecured clair	creditor has more than one priority f claim it is. If a claim has both prionuch as possible, list the claims in a ms, fill out the Continuation Page o	ority and nonpriority amo	ounts, list that clain	m here and or's name. If
(For an explai	nation of each type	e of claim, see the	e instructions for this form in the ins	struction booklet.		
				Total claim	Priority amount	Nonpriority amount
2.1				\$3,690.00	\$3,690.00	\$0.00
Robert J Adams			Last 4 digits of account number	•		
Priority Creditor's Nam 901 W Jackson, Number Street			When was the debt incurred?	07/20/2016		
			As of the date you file, the clain	n is: Check all that app	lv.	
			Contingent		.,.	
Chicago City		60607 ZIP Code	Unliquidated Disputed			
Who incurred the	debt? Check o	ne.	Type of PRIORITY unsecured c	laim:		
Debtor 1 only			Domestic support obligations			
Debtor 2 only Debtor 1 and 0	Debtor 2 only		Taxes and certain other debts Claims for death or personal		ent	
	the debtors and a	nother	intoxicated	, s., you woro		
	claim is for a com	munity debt	Other. Specify			
Is the claim subje	ct to offset?		Attorney fees for this cas	se		
✓ No Yes						

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Debtor 1	Bryant First Name	Middle Name	Crawl Last Name	Case number (if known)	
Part 2:	List All of	Your NONPRIORI	TY Unsecured Cla	aims	
3. Do a	ny creditors have	nonpriority unsecure	d claims against you	?	
	No. You have not Yes	hing to report in this par	rt. Submit this form to	the court with you other schedules.	
_	all of your nonnrid	ority unsecured claims	s in the alphahetical (order of the creditor who holds each claim.	
If a c	reditor has more the of claim it is. Do n	nan one nonpriority unse ot list claims already inc	ecured claim, list the c	creditor separately for each claim. For each claim listed, ore than one creditor holds a particular claim, list the oth out the Continuation Page of Part 2.	
					Total claim
4.1			Land A. Badda af an		\$1,500.00
AT&T Nonpriority	Creditor's Name		Last 4 digits of ac When was the del		
PO Box 8	8212 Street			u file, the claim is: Check all that apply.	
	Sileet			The, the claim is. Once an that apply.	
			Unliquidated		
Aurora		IL 60572	Disputed		
City		State ZIP Code	Type of NONPRIC	ORITY unsecured claim:	
	or 1 only	Check one.	Student loans		
<u> </u>	or 2 only			ising out of a separation agreement or divorce of report as priority claims	
二	or 1 and Debtor 2 o	•	·	ion or profit-sharing plans, and other similar debts	
ш	st one of the debto		Other. Specify	/	
_		or a community debt	Utility		
No No	im subject to offs	et?			
Yes					
4.2					
4.2					\$4,875.00
	wk Finance Creditor's Name		Last 4 digits of ac When was the de		
Dept 208	3032				
Number P.O.Box	Street 5998		Contingent	u file, the claim is: Check all that apply.	
			Unliquidated		
Carol St	ream	IL 60197	Disputed		
City		State ZIP Code	Type of NONPRIC	DRITY unsecured claim:	
		Check one.	☐ Student loans		
لنا	or 1 only or 2 only			ising out of a separation agreement or divorce	
Debto	or 1 and Debtor 2 o		•	ot report as priority claims ion or profit-sharing plans, and other similar debts	
_	st one of the debto		Other. Specify	•	
		or a community debt	Auto Ioan		
	im subject to offs	et?			
✓ No ☐ Yes					

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Debtor 1	Bryant		Crawl Case number (if known)	
	First Name	Middle Name	Last Name	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Continuation Page	
After listing previous pa	-	n this page, number the	em sequentially from the	Total claim
4.3				\$3,300.00
City of Chi	cago-tickets	;	Last 4 digits of account number	
Nonpriority Cre			When was the debt incurred?	
Dept. of Re	Street		As of the date you file, the claim is: Check all that apply.	
121 N. LaS	alle St., Roo	m 107A	_ Contingent	
			☐ Unliquidated ☐ Disputed	
Chicago		IL 60602	Disputed	
City	-d 4h - d - h40	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 1	ed the debt?	Check one.	Student loans	
Debtor 2	-		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Debtor 1	and Debtor 2		Debts to pension or profit-sharing plans, and other similar debts	
_		tors and another	Other. Specify	
☐ Check if	f this claim is	for a community debt	Other	
	subject to off	set?		
✓ No ☐ Yes				
4.4				\$700.00
First Prem			Last 4 digits of account number	
Nonpriority Cre P.O.Box 55			When was the debt incurred?	
	Street		As of the date you file, the claim is: Check all that apply.	
			_ Contingent	
			☐ Unliquidated ☐ Disputed	
Sioux Falls	3	SD 57117-5519		
City	-d 4h - d - h40	State ZIP Code Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1	ed the debt?	Check one.	Student loans	
Debtor 2	.*		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1	and Debtor 2	•	Debts to pension or profit-sharing plans, and other similar debts	
ш		tors and another	☑ Other. Specify	
-		for a community debt	Credit Card	
	subject to off	set?		
✓ No Yes				
4.5				\$2,000.00
	pany of Mar	y Hospital	Last 4 digits of account number	
Nonpriority Cre 2880 W. 87	_		When was the debt incurred?	
	Street		As of the date you file, the claim is: Check all that apply.	
			Contingent	
			☐ Unliquidated ☐ Disputed	
Chicago		IL 60652-3831		
City Who incurre	ed the debt?	State ZIP Code Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2	2 only		that you did not report as priority claims	
_	and Debtor 2	•	Debts to pension or profit-sharing plans, and other similar debts	
ш		tors and another	Other. Specify	
-		for a community debt	medical	
Is the claim No	subject to off	Set?		
Yes Tes				

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Debtor 1 Bryant		Crawl Case number (if known)	
First Name	Middle Name	Last Name	
Part 2: Your NOI	NPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries o	n this nage number the	m conjunitially from the	
previous page.	in this page, number the	in sequentially from the	Total claim
4.6			\$1,582.00
Peoples Gas		Last 4 digits of account number	
Nonpriority Creditor's Name		When was the debt incurred?	
n/k/a People's Energy Number Street		As of the date you file, the claim is: Check all that apply.	
200 E. Randoph		_ Contingent	
		Unliquidated	
Chicago	IL 60687-6207	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt?	Check one.	Student loans	
Debtor 1 only		Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2	only	that you did not report as priority claims	
Debtor 1 and Debtor 2 At least one of the deb	•	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is		✓ Other. Specify	
Is the claim subject to off		Utility	
No No	361:		
Yes			
4.7			\$1,086.00
Pinnacle Credit Service	es	Last 4 digits of account number	_
Nonpriority Creditor's Name P.O.Box 640		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Hopkins	MN 55343	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt?	Check one.	Student loans	
Debtor 1 only		Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2	only	that you did not report as priority claims	
Debtor 1 and Debtor 2 At least one of the deb	•	Debts to pension or profit-sharing plans, and other similar debts	
_	for a community debt	✓ Other. Specify	
Check if this claim is Is the claim subject to off		Collecting for -	
No No	301:		
Yes			
4.8			\$2,000.00
Roseland Community	Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name 45 W. 111th St.		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Chicago	IL 60628	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt?	Check one.	Student loans	
Debtor 1 only Debtor 2 only		Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2	only	that you did not report as priority claims	
At least one of the deb		Debts to pension or profit-sharing plans, and other similar debts	
	for a community debt	✓ Other. Specify Medical	
Is the claim subject to off		modiodi	
No No	 -		
Yes			

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Debtor 1	Bryant			Crawl Case number (if known)	
	First Name		Middle Name	Last Name	
Part 2:	Your NO	NPRIO	RITY Unsacui	red Claims Continuation Page	
previous p	•	on this pa	age, number the	m sequentially from the	Total claim
4.9					\$1,500.00
Sprint				Last 4 digits of account number	
Nonpriority C P.O.Box 6	reditor's Name			When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				_ Contingent	
				□ Unliquidated □ □ Disputed	
Jacksonv	rille	FL	32260-0670	☐ Disputed	
City		State	ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check	one.	☐ Student loans	
☑ Debtor☑ Debtor	•			Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2	only		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	t one of the del	otors and	another	Other. Specify	
☐ Check	if this claim is	for a co	mmunity debt	Utility	
Is the clair	n subject to of	fset?		•	
☑ No					
Yes					
4.10					¢200 00
	laatian Cami			Last A digita of account number	\$386.00
	lection Servion reditor's Name	ce		Last 4 digits of account number	
2509 S. S	toughton Rd.	•		When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				_	
				Disputed	
Madison City		WI State	53716 ZIP Code		
•	red the debt?	Check		Type of NONPRIORITY unsecured claim:	
▼ Debtor	1 only			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor	•			that you did not report as priority claims	
느 *****	1 and Debtor 2		anothor	☐ Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the del			Other. Specify	
_	if this claim is		mmunity debt	Collecting for -	
	n subject to of	rset?			
✓ No ☐ Yes					
4.11					\$5,000.00
	tment of Edu	ıcation		Last 4 digits of account number	
Nonpriority C 501 Bleek	reditor's Name			When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				_ Contingent	
				Unliquidated	
Utica		NY	13502	Disputed	
City		State	ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check	one.	Student loans	
☑ Debtor ☐ Debtor	-			Obligations arising out of a separation agreement or divorce	
ш	1 and Debtor 2	only		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	t one of the del	otors and	another	Other. Specify	
Check	if this claim is	for a co	mmunity debt	Student Loans	
	n subject to of	fset?			
☑ No					
☐ Yes					

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Debtor 1	Bryant			Crawl	Case number (if known)			
	First Name		Middle Name	Last Name	·			
Part 2:	Your NO	NPRIC	ORITY Unsecu	red Claims Continuation	Page			
After listing previous	• •	on this _l	page, number the	m sequentially from the		Total claim		
4.12						\$1,500.00		
Verizon \				Last 4 digits of account numb	per			
	Creditor's Name			When was the debt incurred?				
1515 Woodfield Rd. Number Street				As of the date you file, the claim is: Check all that apply.				
Schauml City	burg	IL State Chec	60173 ZIP Code	 ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Type of NONPRIORITY unsections 	ured claim:			
Debto Debto Debto At leas	rred the debt? or 1 only or 2 only or 1 and Debtor 2 st one of the debt k if this claim is	only otors and	d another	that you did not report as p	separation agreement or divorce riority claims sharing plans, and other similar debts			
Is the clai ✓ No ☐ Yes	im subject to of	fset?						

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Debtor 1	Bryant		Crawl	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🕇	\$3,690.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$3,690.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$25,429.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$25,429.00

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Fill in this inf	ormation to ide			
Debtor 1	Bryant First Name	Middle Name	Crawl Last Name	
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	
			STRICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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					_	
Fill	in this inf	ormation to	identify your case:			
Debt	or 1	Bryant		Crawl		
		First Name	Middle Name	Last Name		
Debt						
(Spo	use, if filing)	First Name	Middle Name	Last Name		
Unite	ed States Bai	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case	number					
(if kn					Check if this is an amended filing	
Ott: -	:-! -	40011				
	ial Form					
Sch	edule H:	Your Cod	ebtors			12/1
	o you have	of any Addition		ame and case number (if kno	se as a codebtor.)	
		•	•		y? (Community property states and territories xas, Washington, and Wisconsin.)	
5	_					
	Yes. Did No Yes		rmer spouse, or legal ed	quivalent live with you at the ti	me?	
p c	Column 1, erson show reditor on S	n in line 2 agair <i>chedule D</i> (Offi	as a codebtor only if	that person is a guarantor or dule E/F (Official Form 106E/	tor if your spouse is filing with you. List the r cosigner. Make sure you have listed the /F), or Schedule G (Official Form 106G). Use	
	0.4				Outron O. The smaller of the	

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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G	ill in this inform	ation to ide	entify your case:					
	Debtor 1	Bryant		Crawl				
		First Name	Middle Name	Last Name			Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing
	United States Bankro	uptcy Court for	the: NORTHERN	DISTRICT OF IL	LIN	OIS		A supplement showing postpetition
1	Case number				_			chapter 13 income as of the following date:
	(if known)							MM / DD / YYYY
_	fficial Form 10	_						
So	chedule I: You	ur Incom						12/15
res inc abo you	ponsible for supply lude information ab out your spouse. If ur name and case n	ing correct in out your spo more space i	oformation. If you are use. If you are separ s needed, attach a se wn). Answer every q	married and not ated and your spo parate sheet to th	iling use	j jointly is not	y, and your filing with y	d Debtor 2), both are equally spouse is living with you, you, do not include information any additional pages, write
1.	Fill in your employ	yment						
	If you have more the	nan one		Debtor 1				Debtor 2 or non-filing spouse
	job, attach a separate page with information about	9	imployment status	✓ Employed✓ Not employed	ha			☐ Employed☐ Not employed
	additional employe	rs.	Occupation	BDC Rep	Ju			
	Include part-time, s or self-employed w	seasonal,	imployer's name	Hawk Ford				
	Occupation may in student or homema applies.	_	imployer's address	6100 W. 95th S Number Street	it.			Number Street
				Oak Lawn City		IL State	60423 Zip Code	City State Zip Code
		F	low long employed th	nere? 3 mont	ns			
E	art 2: Give D	etails Ahou	ıt Monthly Incom				_	
			•		ing t	o repor	t for any line	e, write \$0 in the space. Include your
	n-filing spouse unless	, ,						
•	, ,	•	nore than one employe ate sheet to this form.	er, combine the info	orma	tion for	all employe	ers for that person on the lines below. If
						For I	Debtor 1	For Debtor 2 or non-filing spouse
2.			ary, and commissions nonthly, calculate what		2.	_	\$1,733.33	
3.	Estimate and list	monthly over	ime pay.		3.	+	\$0.00	
4.	Calculate gross in	ncome. Add l	ine 2 + line 3.		4.		\$1,733.33	

Official Form 106l Schedule I: Your Income page 1

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Debt	or 1	Bryant Crawl		Case nu	mber (if k	nown)		
		First Name Middle Name Last Name		For Debtor 1		ebtor 2 or ling spouse	<u>. </u>	
	Cop	oy line 4 here	4.	\$1,733.33				
		all payroll deductions:						
		Tax, Medicare, and Social Security deductions	5a.	\$168.78				
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00				
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00				
		Required repayments of retirement fund loans	5d.	\$0.00				
	5e.	Insurance	5e.	\$0.00				
	5f.	Domestic support obligations	5f.	\$0.00				
	5g.	Union dues	5g.	\$0.00				
	5h.	Other deductions. Specify:	5h. +	\$0.00				
		the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$168.78	_			
		culate total monthly take-home pay. Subtract line 6 from line 4. all other income regularly received:	7.	\$1,564.55				
		Net income from rental property and from operating a	8a.	\$0.00				
	ou.	business, profession, or farm	ou.	ΨΟ.ΟΟ				
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b.	Interest and dividends	8b.	\$0.00				
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00				
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d.	Unemployment compensation	8d.	\$0.00				
	8e.	Social Security	8e.	\$0.00				
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$0.00				
	8g.	Pension or retirement income	8g.	\$0.00				
	8h.	Other monthly income.						
		Specify: Average Monthly Bonuses	8h. +	\$950.00				
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$950.00				
10.	Cal d	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,514.55	+		=[\$2,514.55
	Inclu frien	te all other regular contributions to the expenses that you list in Soude contributions from an unmarried partner, members of your households or relatives. Into the include any amounts already included in lines 2-10 or amounts that	old, yo	our dependents, you				ıle J.
	Spe	cify:				11.	+	\$0.00
40		the amount to the last actions of the 40 to the amount to the 44.	T t	and the discount to		40	Γ	
		I the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Your Assets and Liabilities					L	\$2,514.55
		applies.	- aa			••		Combined nonthly income
13.	_ '	you expect an increase or decrease within the year after you file the	his for	m?				
		No. Yes. Explain:						

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F	ill in this inform	nation to ident	ify your case:			Cha	als if this	io	
Debtor 1 Bryant Crawl					l	Check if this is: An amended filing			
	DODIO! 1	First Name	Middle Name	Last Na		📙	A supp	lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ime		followin	r 13 expenses a ng date:	is of the
	United States Bankr	uptcy Court for the	e: NORTHERN	DISTRICT O	FILLINOIS		MM / D	D / YYYY	
	Case number (if known)								
Of	fficial Form 10	6 <u>J</u>				-			
Sc	chedule J: Yo	ur Expense	es						12/15
cor	rect information. If	more space is n	eeded, attach and swer every questi	other sheet to t	ing together, both an his form. On the top				
1.	Is this a joint case	e?							
2.	✓ No. Go to lind Yes. Does D No	e 2. ebtor 2 live in a s s. Debtor 2 must f	•		s for Separate House	hold o	f Debtor	2.	
	Do not list Debtor Debtor 2.	ä	Yes. Fill out this for each depend		Dependent's relati Debtor 1 or Debtor		p to	Dependent's age	Does dependent live with you?
	Do not state the de names.	ependents'							Yes
3.	Do your expenses expenses of peopyourself and your	ole other than	✓ No □ Yes					,	□ No □ Yes
P	art 2: Estima	ate Your Ongo	ing Monthly E	xpenses					
to ı		of a date after th		-	re using this form as supplemental Sche			-	
	lude expenses paid th assistance and h		•	•	know the value of cial Form 106I.)			Your expens	ses
4.	The rental or hom Include first mortga						4	4	\$750.00
	If not included in		_						
	4a. Real estate ta	axes					4	4a	
	4b. Property, hom	neowner's, or rente	er's insurance				4	4b	
	4c. Home mainte	nance, repair, and	l upkeep expenses	3			4	4c	
	4d Homeowner's	association or co	ndominium dues					1d	

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Crawl

Deb	tor 1	Bryant	Crawl	Case number	(if known)
		First Name	Middle Name Last Nam	e	
					Your expenses
5.	Add	litional mortgage	payments for your residence, such as h	nome equity loans	5.
6.		ities:		, ,	
	6a.	Electricity, heat, n	atural gas		6a. \$80.00
	6b.	Water, sewer, gar	bage collection		6b.
	6c.		none, Internet, satellite, and		6c. \$220.00
	6d	cable services Other. Specify:			6d.
7.		d and housekeep			7. \$300.00
 8.		•	n's education costs		8.
9.		thing, laundry, and		See continuation sheet(s) for details)	9. \$150.00
		sonal care produc	,	(See Community)	10. \$20.00
		dical and dental ex			11. \$75.00
			de gas, maintenance, bus or train		12. \$200.00
	fare	. Do not include ca	ar payments.		
13.		ertainment, clubs, gazines, and book	recreation, newspapers, s		13.
14.	Cha	ritable contribution	ons and religious donations		14.
15.		ırance.			
	Do r	not include insuran	ce deducted from your pay or included in	lines 4 or 20.	
	15a.	. Life insurance			15a
	15b.	. Health insurance	e		15b
	15c.	. Vehicle insurand	ce		15c. \$235.00
	15d.	. Other insurance	. Specify:		15d
16.	Tax	aif	de taxes deducted from your pay or include		46
	Spe				16.
17.	Inst	allment or lease p			
	17a.	. Car payments for	or Vehicle 1 2012 Chevy Cruze		17a. \$379.00
	17b.	. Car payments for	or Vehicle 2		17b
	17c.	. Other. Specify:			17c
	17d.	. Other. Specify:			17d
18.			nony, maintenance, and support that y ay on line 5, Schedule I, Your Income (18.
19.	Oth	er payments you ı	nake to support others who do not live	with you.	
		cify:			19.

Debtor 1 Bryant

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Deb	tor 1	Bryant		Crawl	Case number (if k	:nown)
		First Name	Middle Name	Last Name	·	, -
20.		er real property ex edule I: Your Inco		in lines 4 or 5 of this form or	on	
	20a.	Mortgages on ot	her property		20	a
	20b.	Real estate taxe	s		20	b
	20c.	Property, homeo	wner's, or renter's insu	rance	20	c
	20d.	Maintenance, rep	pair, and upkeep exper	ises	20	d
	20e.	Homeowner's as	sociation or condomini	um dues	20	e
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your month	ly expenses.			
	22a.	Add lines 4 throu	ıgh 21.		22	a. \$2,409.00
	22b.	Copy line 22 (mo	onthly expenses for Del	otor 2), if any, from Official For	m 106J-2. 22	b
	22c.	Add line 22a and	d 22b. The result is you	r monthly expenses.	22	c. \$2,409.00
23.	Calc	ulate your month	ly net income.			
	23a.	Copy line 12 (yo	ur combined monthly in	come) from Schedule I.	23	a. \$2,514.55
	23b.	Copy your month	nly expenses from line	22c above.	23	b. \$2,409.00
	23c.		onthly expenses from your monthly net income.	our monthly income.	23	c. \$105.55
24.	Do y	ou expect an incr	ease or decrease in y	our expenses within the yea	r after you file this form?	
				r your car loan within the year a modification to the terms of y	or do you expect your mortgage our mortgage?	
		No. Yes. Explain here None.	x:			

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Debtor 1	1 Bryant First Name Middle Name		Crawl	Case number (if known)	
			Last Name		
9. Clot	hing, laundry, an	nd dry cleaning (details):			
· <u>· · · · · · · · · · · · · · · · · · </u>	g,,,	a ary oroaning (accumo).			\$150.00
				Total:	\$150.00

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Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$11,690.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$11,690.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$9,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$3,690.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$25,429.00
	Your total liabilities	\$38,119.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,514.55
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,409.00

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Debtor 1		Bryant		Crawl	Case numbe	er (if known)	
Pa	First Name Middle Name Last Name Part 4: Answer These Questions for Administrative and Statistical Records				, ,		
	AI C -T.	Allower	icac questions ic	Administrative	ina Otatiotical Neccon	u3	
6.	Are yo	ou filing for bank	cruptcy under Chapte	rs 7, 11, or 13?			
	ш	o. You have not es	hing to report on this pa	art of the form. Check t	his box and submit this for	m to the court with yo	ur other schedules.
7.	What I	kind of debt do y	ou have?				
	<u> </u>	•	•		re those "incurred by an ince those statistical purpose		a personal,
			ot primarily consumer urt with your other sche		ing to report on this part of	the form. Check this	box and submit
8.				<i>ly Income:</i> Copy your t 3 Line 11; OR , Form 122	otal current monthly income 2C-1 Line 14.	e from	\$447.16
9.	Copy t	the following sp	ecial categories of cla	aims from Part 4, line (6 of Schedule E/F:		
						Total claim	
	From I	Part 4 on Sched	<i>lule E/F,</i> copy the follo	owing:			
	9a. D	omestic support	obligations. (Copy line	e 6a.)		\$0.0	<u>0</u>
	9b. Ta	axes and certain	other debts you owe th	ne government. (Copy I	ine 6b.)	\$0.0	<u>0</u>
	9c. C	laims for death o	r personal injury while	you were intoxicated. (Copy line 6c.)	\$0.0	0_
	9d. S	tudent loans. (C	opy line 6f.)			\$0.0	0_

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

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Fill in this inf	ormation to id	entify your case:			
Debtor 1	Bryant		Crawl		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	—	
United States Bar	nkruptcy Court for	the: NORTHERN DI	STRICT OF ILLINOIS		
Case number (if known)				☐ Check if this is an amended filing	
Official Form	106Dec				
Declaration	About an In	dividual Debt	or's Schedules	12/1	15
concealing proper \$250,000, or impri	rty, or obtaining n	noney or property by		hedules. Making a false statement, h a bankruptcy case can result in fines up to 519, and 3571.	
Did you pay o	or agree to pay so	meone who is NOT a	an attorney to help you f	ill out bankruptcy forms?	
☑ No					
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
Under penalty		lare that I have read	the summary and sched	ules filed with this declaration and that they are	
ti de dila com					

Signature of Debtor 2

MM / DD / YYYY

Date

X /s/ Bryant Crawl
Bryant Crawl, Debtor 1

Date <u>07/21/2016</u>

MM / DD / YYYY

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Debtor 1	Bryant First Name	Middle Name	<u> </u>	Crawl Last Name				
Debtor 2	, mot riamo	a.io i taint	-	24011141110				
	ng) First Name	Middle Name	Э	Last Name				
Inited States	Bankruptcy Court fo	or the: NORTHE	RN DIS	STRICT OF ILI	INOIS			
Case number if known)					_		neck if this is an nended filing	
fficial For	m 107							
tatement	of Financia	Affairs for	' Indiv	viduals Fil	ing for Bank	ruptcv		04/16
	Give Details Ab		ital Sta	atus and Wh	ere You Lived	Before		
What is yo Married Not ma	Give Details Ab	status?				Before		
What is yo Married Not ma During the	Give Details Ab ur current marital arried last 3 years, have	status? you lived anywl	here oth	ner than where				
What is yo Married Not ma During the	Give Details Ab ur current marital durried last 3 years, have ist all of the places	status? you lived anywl	here oth ast 3 yea Date	ner than where	you live now?		Dates Debtor lived there	2
What is yo Married Not ma During the No Yes. L	Give Details Ab ur current marital durried last 3 years, have ist all of the places	status? you lived anywl	here oth ast 3 yea Date	ner than where ars. Do not inclus S Debtor 1	you live now? ude where you live i	now.		
What is yo Married Not ma During the No Yes. L Debtor	Give Details Ab ur current marital durried last 3 years, have ist all of the places	status? you lived anywl	here oth ast 3 yea Date	ner than where ars. Do not inclu s Debtor 1 there	you live now? ude where you live t Debtor 2:	now.	lived there	
What is yo Married Not ma During the No Yes. L Debtor	Give Details Ab ur current marital durried last 3 years, have ist all of the places 1:	status? you lived anywl	here oth ast 3 yea Date: lived	ner than where ars. Do not inclu s Debtor 1 there	you live now? ude where you live t Debtor 2:	now.	lived there Same as	
What is yo Married Not ma During the No Yes. L Debtor	Give Details Ab ur current marital durried last 3 years, have ist all of the places 1: S. King Dr. Street	status? you lived anywl	here oth ast 3 yea Date lived	ner than where ars. Do not inclus S Debtor 1 there	you live now? Ide where you live I Debtor 2: Same as De	now.	lived there Same as From	

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Deb	Debtor 1 Bryant First Name Middle Name		Crawl Last Name				
P	art 2:	Explain th	ne Sources of Y	our Income			
4.	Fill in th	ne total amount	of income you rece	nent or from operating a buived from all jobs and all busincome that you receive toge	inesses, including par	t-time activities.	endar years?
	□ No ✓ Yes	s. Fill in the de	tails.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ary 1 of the cur u filed for bank	•	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$2,683.50	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		calendar year December 31		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$10,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		endar year befo		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$18,000.00		
5.	Include unempl	income regard loyment; and ot mbling and lotte	less of whether that her public benefit pa	g this year or the two prevince in the income is taxable. Example ayments; pensions; rental income in a joint case and you have	es of other income are come; interest; dividen	ds; money collected from lav	vsuits; royalties;
	☑ No			m each source separately. [Do not include income	that you listed in line 4.	

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Del	otor 1	Bryant		Crawl	Case number (if known)
		First Name	Middle Name	Last Name	
Р	art 3:	List Ce	ertain Payments You	u Made Before You	Filed for Bankruptcy
6.	Are eith	er Debtor	1's or Debtor 2's debts	primarily consumer deb	s?
	□ No.		Debtor 1 nor Debtor 2 h	•	debts. Consumer debts are defined in 11 U.S.C. § 101(8) as r household purpose."
		During t	he 90 days before you file	ed for bankruptcy, did you	pay any creditor a total of \$6,425* or more?
		□ No.	Go to line 7.		
		☐ Yes.	total amount you paid th	nat creditor. Do not includ	of \$6,425* or more in one or more payments and the e payments for domestic support obligations, such as ayments to an attorney for this bankruptcy case.
		* Subjec	ct to adjustment on 4/01/1	9 and every 3 years after	that for cases filed on or after the date of adjustment.
	✓ Yes	. Debtor	1 or Debtor 2 or both ha	ve primarily consumer o	lebts.
		During t	he 90 days before you file	ed for bankruptcy, did you	pay any creditor a total of \$600 or more?
		☑ No.	Go to line 7.		
		☐ Yes.	creditor. Do not include		of \$600 or more and the total amount you paid that upport obligations, such as child support and alimony. nis bankruptcy case.
7.	Insiders corporat agent, ir	include you ions of whit including on	our relatives; any general ich you are an officer, dire	partners; relatives of any ector, person in control, or	ment on a debt you owed anyone who was an insider? general partners; partnerships of which you are a general partner; owner of 20% or more of their voting securities; and any managing 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	. List all pa	ayments to an insider.		
8.		year befo	•	otcy, did you make any p	ayments or transfer any property on account of a debt that
	Include	payments of	on debts guaranteed or co	osigned by an insider.	
	✓ No ☐ Yes	. List all pa	ayments that benefited an	n insider.	
	(/ c		l.al.Aatiana Da		
	art 4:		y Legal Actions, Re		
9.	List all s	uch matter			any lawsuit, court action, or administrative proceeding? ions, divorces, collection suits, paternity actions, support or custody
	☑ No ☐ Yes	. Fill in the	e details.		

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Deb	otor 1	Bryant First Name	Middle Name	Crawl Last Name	Case number (if k	nown)	
10.	seized,		ı filed for bankrup	otcy, was any of your prop	perty repossessed, foreclosed	d, garnished, attach	ed,
	_	. Go to line 11. s. Fill in the inform	nation below.				
11.				uptcy, did any creditor, in make a payment because	cluding a bank or financial in you owed a debt?	stitution, set off any	
	✓ No ☐ Yes	s. Fill in the details	S.				
12.				otcy, was any of your propustodian, or another offici	perty in the possession of an al?	assignee for the be	nefit of
	✓ No ☐ Yes	6					
P	art 5:	List Certain	Gifts and Cor	tributions			
13.	Within	2 years before yo	ou filed for bankru	ıptcy, did you give any gif	ts with a total value of more t	han \$600 per perso	n?
	✓ No	s. Fill in the details	s for each gift.				
14.		2 years before yo charity?	ou filed for bankru	ıptcy, did you give any gif	ts or contributions with a tota	al value of more tha	n \$600
	☑ No □ Yes	s. Fill in the details	s for each gift or co	ontribution.			
P	art 6:	List Certain	Losses				
15.		1 year before you lisaster, or gambl		otcy or since you filed for	bankruptcy, did you lose any	thing because of the	eft, fire,
	✓ No ☐ Yes	s. Fill in the details	5.				
P	art 7:	List Certain	Payments or	Transfers			
16.	anyone	you consulted a	bout seeking ban	kruptcy or preparing a ba			-
	Include	any attorneys, bar	nkruptcy petition p	reparers, or credit counselir	ng agencies for services require	ed for your bankrupto	y.
	☐ No ✓ Yes	s. Fill in the details	S.				
	debtor			Description and value of Credit Counseling	any property transferred	Date payment or transfer was made	Amount of payment
Num	nber Str	reet				July 20, 2016	\$15.00
City		State	e ZIP Code				
Ema	ail or websi	te address					
Doro	on Mho N	Made the Payment if N	lot Vou				

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Deb			Middle Name	Crawl	Case number (if k	nown)	
D - I	First Name			Last Name Description and value of any pro	perty transferred	Date payment or transfer was	Amount of payment
	oert J. Adams & As on Who Was Paid	socia	tes			made	pay
	W. Jackson, Ste.	202				July 20, 2016	\$310.00
Numl	ber Street						
	cago	IL	60607				
City		State	ZIP Code				
Emai	il or website address						
Perso	on Who Made the Payme	nt, if Not	You				
17.	•	-	-	otcy, did you or anyone else acting ith your creditors or to make paym			perty to
	Do not include any p	ayment	or transfer that	you listed on line 16.			
	✓ No✓ Yes. Fill in the of	etails.					
18.	•	-		iptcy, did you sell, trade, or otherw se of your business or financial aff		perty to anyone, otl	ner than
	•			made as security (such as granting ave already listed on this statement.	of a security interest of	or mortgage on your	property).
	✓ No ☐ Yes. Fill in the o	etails.					
19.	•	-		ruptcy, did you transfer any proper called asset-protection devices.)	ty to a self-settled tr	ust or similar devic	e of which
	✓ No ☐ Yes. Fill in the o	etails.					
Pa	art 8: List Cer	tain F	inancial Acc	ounts, Instruments, Safe De	posit Boxes, and	l Storage Units	
20.	Within 1 year before benefit, closed, sole			otcy, were any financial accounts o	or instruments held i	n your name, or for	your
	Include checking, sa	vings, r	noney market, o	or other financial accounts; certificate ciations, and other financial institution	•	n banks, credit union	s, brokerage
	✓ No ☐ Yes. Fill in the o	etails.					
21.	Do you now have, of for securities, cash	-		1 year before you filed for bankrup	otcy, any safe depos	it box or other depo	ository
	✓ No ☐ Yes. Fill in the o	etails.					

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Deb	tor 1	Bryant	Middle Nove	Crawl	Case number (if known)	
22.	Have yo	First Name ou stored property i	Middle Name n a storage unit or	Last Name place other than your home	within 1 year before you filed for bankru	ptcy?
	✓ No ☐ Yes	. Fill in the details.	·			
P	art 9:	Identify Prope	rty You Hold or	Control for Someone I	Else	
23.	•	hold or control any in trust for someon		eone else owns? Include ar	ny property you borrowed from, are storin	ng for,
	✓ No ☐ Yes	. Fill in the details.				
P	art 10:	Give Details A	bout Environme	ental Information		
or	the purp	ose of Part 10, the	following definition	s apply:		
ł	nazardou	is or toxic substanc	e, wastes, or mater	•	concerning pollution, contamination, releaurface water, groundwater, or other mediuses, wastes, or material.	
		•		defined under any environi cluding disposal sites.	mental law, whether you now own, operat	te, or
				nmental law defines as a haz aminant, or similar item.	zardous waste, hazardous substance, tox	ic
₹ер	ort all no	otices, releases, and	d proceedings that	you know about, regardless	s of when they occurred.	
24.	Has any law?	y governmental unit	notified you that y	ou may be liable or potentia	ally liable under or in violation of an enviro	onmental
	✓ No ☐ Yes	. Fill in the details.				
25.	☑ No	ou notified any gove	ernmental unit of an	ny release of hazardous mat	erial?	
26.	Have you	ou been a party in a	ny judicial or admir	nistrative proceeding under	any environmental law? Include settleme	ents and
	✓ No ☐ Yes	. Fill in the details.				

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Deb	otor 1	Bryant	(rawl	Case number (if known)
		First Name	Middle Name L	ast Name	
P	art 11:	Give Details	About Your Busines	s or Connection	ns to Any Business
27.	Within 4	•	ou filed for bankruptcy, dic	l you own a busine	ss or have any of the following connections to any
		A member of a l A partner in a pa An officer, direct	imited liability company (LLC	C) or limited liability portion	
			ve applies. Go to Part 12. apply above and fill in the de	tails below for each	business.
28.		•	ou filed for bankruptcy, dic , creditors, or other parties		al statement to anyone about your business? Include
	□ No □ Yes	. Fill in the detail:	s below.		
P	art 12:	Sign Below			
that proportion	answers perty by poth. 18	s are true and co fraud in connect U.S.C. §§ 152, 13	orrect. I understand that m ion with a bankruptcy cas 841, 1519, and 3571.	aking a false stater e can result in fines	achments, and I declare under penalty of perjury nent, concealing property, or obtaining money or s up to \$250,000, or imprisonment for up to 20 years,
-		nt Crawl awl, Debtor 1		Signature of Debte	or 2
	•	07/21/2016		Date	J. Z.
		ch additional pa	ges to Your Statement of F	inancial Affairs for	Individuals Filing for Bankruptcy (Official Form 107)?
Did	you pay	or agree to pay	someone who is not an att	orney to help you f	ill out bankruptcy forms?
☑		me of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
					Deciaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

ın	re Bryant Crawi	Case No.
		Chapter <u>13</u>
	DISCLOSURE OF COMPENSATION O	F ATTORNEY FOR DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in co is as follows:	e petition in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$4,000.00
	Prior to the filing of this statement I have received	\$310.00
	Balance Due	\$3,690.00
2.	. The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)	
3.	. The source of compensation to be paid to me is:	
	☑ Debtor ☐ Other (specify)	
4.	. I have not agreed to share the above-disclosed compensation associates of my law firm.	with any other person unless they are members and
	☐ I have agreed to share the above-disclosed compensation with associates of my law firm. A copy of the agreement, together w compensation, is attached.	
5.	. In return for the above-disclosed fee, I have agreed to render legal	service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice bankruptcy;	to the debtor in determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of a	ffairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and con	firmation hearing, and any adjourned hearings thereof;

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B2030 (Form	2030)	(12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/21/2016 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates
Robert J Adams & Associates
901 W Jackson Suite 202

901 W Jackson Suite 202 Chicago, IL 60607

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Bryant Crawl

Bryant Crawl

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Bryant Crawl CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

	The above nam	ned Debtor he	reby verifies th	nat the attache	d list of credi	itors is true and	correct to the	best of his/her
knowle	edge.							

Date	Signature/s/ Bryant Crawl Bryant Crawl
Date	Signature

AT&T PO Box 8212 Aurora, IL 60572

Blackhawk Finance Dept 208032 P.O.Box 5998 Carol Stream, IL 60197

City of Chicago-tickets Dept. of Revenue 121 N. LaSalle St., Room 107A Chicago, IL 60602

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519

Little Company of Mary Hospital 2880 W. 87th St. Chicago, IL 60652-3831

Peoples Gas n/k/a People's Energy 200 E. Randoph Chicago, IL 60687-6207

Pinnacle Credit Services P.O.Box 640 Hopkins, MN 55343

Robert J Adams & Associates 901 W Jackson, Suite 202 Chicago, IL 60607

Roseland Community Hospital 45 W. 111th St. Chicago, IL 60628

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Sprint
P.O.Box 600760
Jacksonville, FL 32260-0670

State Collection Service 2509 S. Stoughton Rd. Madison, WI 53716

US Department of Education 501 Bleeker Street Utica, NY 13502

Verizon Wireless 1515 Woodfield Rd. Schaumburg, IL 60173

Westlake Financial Services PO Box 54807 Los Angeles, CA 90054